



District of Columbia State Innovation Model
 Payment Model Work Group: Meeting Summary

March 17, 2015
 3:00 p.m. – 4:30 p.m.

Participants present: Karen Dale (Chair), Joe Weissfeld, Don Blanchon, Mark Weissman, Christy Repress, Leslie Lyles-Smith, Victor Freeman, Dennis Hobb, Emily Eelman, Seiji Hayashi, Patricia Quinn, Suzanne Fenzel, Octavius Williams, Joe Culligan, Constance Yancy, Hazelyn Martin-Henry, Chris Botts, DaShawn Groves, Jess Foster, Gina Eckert, Johanna Barraza Cannon, Dan Weinstein

TOPIC	DISCUSSION
<p>Overview of 3/9/16 Advisory Committee Meeting</p>	<ul style="list-style-type: none"> • The work group reviewed the recent SIM Advisory Committee Meeting <ul style="list-style-type: none"> ➤ Social Determinants of Health <ul style="list-style-type: none"> ○ Prioritizing upstream drivers of health ○ Discussed the potential of a universal screening tool for social determinants of health ➤ Workforce Development <ul style="list-style-type: none"> ○ Enhanced training for existing professionals ○ Emphasized greater use of interdisciplinary teams (and community-based teams) ➤ Shared Accountability <ul style="list-style-type: none"> ○ Improving shared accountability between providers and clarifying responsibilities.
<p>Discuss Pathways Towards a Five Year</p>	<ul style="list-style-type: none"> • Stakeholders suggested:

TOPIC	DISCUSSION
Strategy	<ul style="list-style-type: none"> ➤ Capacity building and up-front investments are needed to spur changes in payment and care delivery. <ul style="list-style-type: none"> ○ HIE was the main example provided by stakeholders ○ It is important to delineate between capacity building supported by government versus that supported by provider groups ➤ Attribution is often the hardest part about designing new payment models/strategies ➤ Eligibility policies often present providers with barriers to delivering comprehensive care ➤ As a District we need to decide if we want to be bold and incremental or bold and more dynamic with a transition towards higher value payment and care models ➤ Discussed focusing on two key provider types for the remaining meetings for SIM: <ul style="list-style-type: none"> ○ <u>Primary/Ambulatory Care</u>: It was suggested that we pursue advanced primary care approaches that provide flexibility for providers to deliver higher-value care. Building off existing efforts, such as Health Home 1 and 2 and other pay-for-performance initiatives, we could develop parameters to move additional primary care providers towards more integrated care networks. ○ <u>Hospitals</u>: It was suggested that hospitals recognize that value-based payment is the future and prepare for this transition. Work group members stated that they were interested in using SIM to discuss value-based payment or shared savings initiatives (similar to Medicare's efforts) on the Medicaid side.
Next Meeting	<ul style="list-style-type: none"> • The next Payment Model Work Group meeting is on Thursday April 21th from 3:00p.m. to 4:30p.m., and will evaluate the feasibility and appropriateness of an advanced primary care model following New York and/or Oregon structures, as well as hospital value-based purchasing models.